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CONFIRMATION NO. 3810

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| SERIAL NUMBER<br>10/643,352 | FILING DATE<br>08/19/2003<br><br>RULE | CLASS<br>211 | GROUP ART UNIT<br>3634 | ATTORNEY<br>DOCKET NO.<br>38949/282196 |
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APPLICANTS

Derek Metcalf, Burr Ridge, IL;

\*\* CONTINUING DATA \*\*\*\*\* NONE *DM*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE *DM*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 11/12/2003

|   |                           |                         |                       |                            |
|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged<br>Examiner's Signature: <i>John S. Pratt</i><br>Initials: <i>DM</i> | STATE OR<br>COUNTRY<br>IL | SHEETS<br>DRAWING<br>13 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
|---|---------------------------|-------------------------|-----------------------|----------------------------|

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 23370  
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TITLE  
 Adjustable shelving system

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>880 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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